



## Supplemental Application Data Sheet

### Application Information

Application number:: 10/783,028  
Filing Date:: 02/23/04  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of copies of CDs::  
Sequence submission?::  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: Fluid-Filled Badder Incorporating a Foam Tensile Member  
Attorney Docket Number:: 005127.00257  
Request for Early Publication?:: NO  
Request for Non-Publication?:: NO  
Suggested Drawing Figure::  
Total Drawing Sheets:: 23  
Small Entity?:: NO  
Latin name::  
Variety denomination name::  
Petition included?:: NO  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: NO

## **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: Eric  
Middle Name:: Steven  
Family Name:: Schindler  
Name Suffix::  
City of Residence:: Portland  
State or Province of Residence:: Oregon  
Country of Residence:: U.S.A.  
Street of mailing address:: 5650 NW 180<sup>th</sup> Place  
City of mailing address:: Portland  
State or Province of mailing address:: Oregon  
Country of mailing address:: U.S.A.  
Postal or Zip Code of mailing address:: 97229

Applicant Authority Type:: Inventor  
Primary Citizenship Country::  
Status:: Full Capacity  
Given Name::  
Middle Name::  
Family Name::  
Name Suffix::  
City of Residence::  
State or Province of Residence::  
Country of Residence::  
Street of mailing address::  
City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name::

Middle Name::

Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

### **Correspondence Information**

Correspondence Customer Number:: 22909

### **Representative Information**

Representative Customer Number:: 22909

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::


## Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

## Assignee Information

Assignee name:: NIKE, Inc.  
 Street of mailing address:: One Bowerman Drive  
 City of mailing address:: Beaverton  
 State or Province of mailing address:: Oregon  
 Country of mailing address:: U.S.A.  
 Postal or Zip Code of mailing address:: 97005